|  |   |   |                  |                      |                                 |                  |          |              | Application or Docket Number |  |         |                     |                        |  |  |
|--|---|---|------------------|----------------------|---------------------------------|------------------|----------|--------------|------------------------------|--|---------|---------------------|------------------------|--|--|
| PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2003  10696575 |   |   |                  |                      |                                 |                  |          |              |                              |  |         |                     | 5                      |  |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)                                   |   |   |                  |                      |                                 |                  |          | SMAL<br>TYPĘ | LEN                          | NTITY  | OR      | OTHER<br>SMALL      |                        |  |  |
| TOTAL CLAIMS 36  |   |   |                  |                      |                                 |                  |          | RAT          | E                            | FEE  |         | RATE                | FEE                    |  |  |
| FOR  |   |   | NUMBER FILED     |                      | NUMBER EXTRA                    |                  |          | BASIC        | FEE                          | 385.00   | OR      | BASIC FEE           | 770.00                 |  |  |
| TOTAL CHARGEABLE CLAIMS  |   |   | 3.6 minus 20=    |                      | . 16.                           |                  |          | X\$ 9=       |                              | •  | OR      | X\$18=              | 288                    |  |  |
| INDEPENDENT CLAIMS   |   |   | minus 3 =        |                      | 2                               |                  |          | X43=         |                              |  | OR      | X86=                | 172                    |  |  |
| MULTIPLE DEPENDENT CLAIM P   |   |   | RESENT           |                      |                                 |                  |          | +145=        |                              |  | OR      | +290=               |                        |  |  |
| * If the difference in column 1 is less than zero, enter *0* in column 2         |   |   |                  |                      |                                 |                  | TOTAL .  |              | OR                           | TOTAL  | 1230    |                     |                        |  |  |
| (Column 1) (Column 2) (Column 3)   |   |   |                  |                      |                                 |                  | <b>)</b> | SMA          | LL                           | ENTITY   | OR      | OTHER<br>SMALL      |                        |  |  |
| AMENDMENT A  |   | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |                  | HIGH<br>NUM<br>PREVK | IEST<br>IBER                    | PRESENT<br>EXTRA |          | RAT          | E                            | ADDI-<br>TIONAL<br>FEE                           |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |  |
|  | Total   | . 30  | Minus            | **                   | 36                              | =                | }        | X\$ 9        | )=                           |  | ÖR      | X\$18=              |                        |  |  |
|  | Independent   | . 2   | Minus            | ***                  | 5                               | s                | }        | X43          | =                            |  | OR      | X86=                | 1                      |  |  |
| ₹  | FIRST PRESENTATION OF MULTIPLE DEPENDENT  |   |                  | T CLAIM              |                                 | J                | +14      |              |                              | OR   | +290=   | (1)                 |                        |  |  |
| ·  |   |   |                  |                      |                                 |                  |          |              | TAL<br>FEE                   | -  | 1       | TOTAL<br>ADDIT. FEE | 1                      |  |  |
|  | (Column 1) (Column 2) (Column 3)  |   |                  |                      |                                 |                  |          |              |                              | <u> </u>   | ]•      | ADDII. FEE          |                        |  |  |
| _  |   | (Column 1)<br>CLAIMS                        | I                | HIG                  | HEST                            |                  | ገ        |              |                              | ADDI-  |         |                     | ADDI-                  |  |  |
| AMENOMENT B  | 7.7.07  | REMAINING<br>AFTER                          |                  | PREVI                | IBER<br>IOUSLY                  | PRESENT          |          | RATE         |                              | TIONAL<br>FEE                                    | ; ".    | RATE                | TIONAL<br>FEE          |  |  |
|  | Total   | AMENDMENT .                                 | Minus            | PAID                 | FOR<br>21                       |                  |          | xs           | 9=                           | 1122   | OR      | X\$18+              |                        |  |  |
|  | Independent   | . 3   | Minus            | ***                  | <u> </u>                        | = -              | 7        | X43          |                              | <del>                                     </del> | 1       | VOC-                | /                      |  |  |
| ₹  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                  |                      |                                 |                  |          | <u> </u>     | , <del>-</del>               |  | OR      | -                   | -                      |  |  |
| _  |   |   |                  |                      |                                 |                  |          | +14          |                              |  | OR      | +290=               |                        |  |  |
|  |   |   |                  |                      |                                 |                  |          | ADDIT.       | FEE                          | <b>4</b> .                                       | OR      | ADDIT. FEE          |                        |  |  |
| (Column 1) (Column 2) (Column 3)   |   |   |                  |                      |                                 |                  |          |              |                              |  | _       |                     |                        |  |  |
| NTC  |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |                  | PREV                 | HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT<br>EXTRA |          | RA           | ſΈ                           | ADDI-<br>TIONAL<br>FEE                           |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |  |
| AMENDMENT C  | Total   | •   | Minus            | **                   |                                 | = .              | 7        | X\$          | <br>9=                       |  | OR      | X\$18=              |                        |  |  |
|  | Independent   | •   | Minus            | ***                  |                                 |                  | <b>]</b> | X4:          | <br>3=                       |  | OA      | 3400                |                        |  |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  |   |                  |                      |                                 |                  |          |              |                              | <u> </u>   | 1       |                     |                        |  |  |
| +145= OR +290=   |   |   |                  |                      |                                 |                  |          |              |                              |  |         |                     |                        |  |  |
|  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ** ADDIT. FEE  *** ADDIT. FEE |   |                  |                      |                                 |                  |          |              |                              |  |         |                     |                        |  |  |
|  | The "Highest Nu   | umber Previously Pa<br>mber Previously Pa   | id For" (Total ( | or Indepen           | dent) is th                     | e highest num    | ber f    | ound in (    | he aj                        | opropriate bo                                    | ox in c | olumn 1.            |                        |  |  |